

FEC
FORM 3P

REPORT OF RECEIPTS
AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE
FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

RECEIVED

2013 FEB 11 AM 7:13

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

People for Robby Wells

7427 Luvanna Dr

ADDRESS (number and street)



Check if different
than previously
reported. (ACC)

Charlotte

CITY

NC

STATE

28213

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C00506055

3. THIS REPORT IS FOR Primary



or General



4. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER)



Quarterly Reports:

Monthly Reports:



April 15 (Q1)



October 15 (Q3)



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11)



July 15 (Q2)



January 31 Year-End Report (YE)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)



Thirtieth day report following the General Election

on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY



Twelfth day report preceding

on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

XX

Is this Report an Amendment?



yes



no

5. Covering Period

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

through

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Robert C. Wells, Jr.

Signature of Treasurer

Robert C. Wells, Jr.

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of this form are obsolete and should no longer be used.

Office
Use
Only

Write or Type Committee Name

Report Covering the Period:

From:

MEM / DED / YEAR
10 / 01 / 2012

To:

MEM / DED / YEAR
12 / 31 / 2012**SUMMARY**

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD 0

7. TOTAL RECEIPTS THIS PERIOD
(From Line 22, Column A, Page 3) 1754.8

8. SUBTOTAL
(Lines 6 and 7) 1754.8

9. TOTAL DISBURSEMENTS THIS PERIOD
(From Line 30, Column A, Page 2) 1754.4

10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD
(Subtract Line 9 from 8) 0.44

11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE
(Itemize All on Schedule C-P or Schedule D-P) 0

12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE
(Itemize All on Schedule C-P or Schedule D-P) 0

13. EXPENDITURES SUBJECT TO LIMITATION 0

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans)
(Subtract Line 28d, Column B from 17e, Column B, Page 2) 1754.8

15. NET OPERATING EXPENDITURES
(Subtract Line 20a, Column B from 23, Column B, Page 2) 1754.4

13031040422

DETAILED SUMMARY PAGE of Receipts

FEC Form 3P (Rev. 03/2011)

Page 3

NAME OF COMMITTEE (in Full)

People for Robby Wells

Report Covering the Period:

From:

MM / DD / YYYY
10 / 01 / 2012

To:

MM / DD / YYYY
12 / 31 / 2012

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

16. FEDERAL FUNDS (Itemize on Schedule A-P)	0	0
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized	17548	17548
(ii) unitemized	0	0
(iii) Total contributions	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees	0	0
(d) The Candidate	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))	17548	17548
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	0	0
(b) Other Loans	0	0
(c) TOTAL LOANS (Add 19(a) and 19(b))	0	0
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating	0	0
(b) Fundraising	17548	17548
(c) Legal and Accounting	0	0
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))	17548	17548
21. OTHER RECEIPTS (Dividends, Interest, etc.)	0	0
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)	17548	17548

13031040423

DETAILED SUMMARY PAGE of Disbursements and Contributed Items

NAME OF COMMITTEE (in Full)

People For Robby Wells

Report Covering the Period:

From:

MM / DD / YYYY
10 / 01 / 2012

To:

MM / DD / YYYY
12 / 31 / 2012MM / DD / YYYY
12 / 31 / 2012**II. DISBURSEMENTS**

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

23. OPERATING EXPENDITURES.....	17544	17544
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
25. FUNDRAISING DISBURSEMENTS	17544	17544
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0	0
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0	0
(b) Other Repayments	0	0
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)).....	0	0
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees	0	0
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))	0	0
29. OTHER DISBURSEMENTS	0	0
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	17544	17544

III. CONTRIBUTED ITEMS
(Stock, Art Objects, Etc.)

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0	0
---	---	---

13031040424

ALLOCATION OF PRIMARY EXPENDITURES
BY STATE FOR
A PRESIDENTIAL CANDIDATE
(Used Only by Primary Committees Receiving
or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C00506055

People for Lobby Wells

ADDRESS (number and street)

7427 Ravenna Dr

Charlotte

CITY

NC

STATE

28213

ZIP CODE

3. NAME OF CANDIDATE

Robert C. Wells, Jr.

ALLOCATION BY STATE

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0	0
Alaska	0	0
Arizona	0	0
Arkansas	0	0
California	0	0
Colorado	0	0
Connecticut	0	0
Delaware	0	0
District of Columbia	0	0
Florida	0	0
Georgia	15000	15000
Hawaii	0	0
Idaho	0	0
Illinois	0	0

13031040426

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Indiana	0	0
Iowa	0	0
Kansas	0	0
Kentucky	0	0
Louisiana	0	0
Maine	0	0
Maryland	0	0
Massachusetts	0	0
Michigan	0	0
Minnesota	0	0
Mississippi	0	0
Missouri	0	0
Montana	0	0
Nebraska	0	0
Nevada	0	0
New Hampshire	0	0
New Jersey	0	0
New Mexico	0	0
New York	0	0
North Carolina	2548	2548
North Dakota	0	0
Ohio	0	0
Oklahoma	0	0
Oregon	0	0
Pennsylvania	0	0

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Rhode Island	0	0
South Carolina	0	0
South Dakota	0	0
Tennessee	0	0
Texas	0	0
Utah	0	0
Vermont	0	0
Virginia	0	0
Washington	0	0
West Virginia	0	0
Wisconsin	0	0
Wyoming	0	0
Puerto Rico	0	0
Guam	0	0
Virgin Islands	0	0
TOTALS	1754.8	1754.8

13031040427

EXPENDITURES SUBJECT TO LIMIT

FEC Form 3P

(Used Only by Primary Committees Receiving or Expecting To Receive Federal Funds)

Page 4

NAME OF COMMITTEE (in Full)

People for Robby Wells

Report Covering the Period:

From:

10 / 01 / 2012

To:

12 / 31 / 2012

A. OPERATING EXPENDITURES

(Line 23, Column B)

17544

B. OPERATING OFFSETS

(Line 20a, Column B)

0

C. CURRENT YEAR NET OPERATING EXPENDITURES

(Subtract Line B from A)

17544

D. PRIOR YEAR(S) OPERATING EXPENDITURES

0

E. PRIOR YEAR(S) OPERATING OFFSETS

0

F. PRIOR YEAR(S) NET OPERATING EXPENDITURES

(Subtract Line E from D)

0

G. FUNDRAISING DISBURSEMENTS

(Line 25, Column B)

17544

H. OFFSETS TO FUNDRAISING DISBURSEMENTS

(Line 20b, Column B)

17544

I. CURRENT YEAR NET FUNDRAISING DISBURSEMENTS

(Subtract Line H from G)

0

J. PRIOR YEAR(S) FUNDRAISING DISBURSEMENTS

0

K. PRIOR YEAR(S) FUNDRAISING DISBURSEMENTS OFFSETS

0

L. PRIOR YEAR(S) NET FUNDRAISING DISBURSEMENTS

(Subtract Line K from J)

0

M. TOTAL NET FUNDRAISING DISBURSEMENTS

(Add Lines I and L)

0

N. 20% EXEMPTION

(20% of Overall Expenditure Limit)

0

O. TOTAL FUNDRAISING DISBURSEMENTS SUBJECT TO LIMIT

(Subtract Line N from M)

0

P. TOTAL EXPENDITURES SUBJECT TO LIMITATION

(Add Lines C, F and O)

17544

13031040428

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

People for Robby Wells

A. Full Name (Last, First, Middle Initial)

Wells Fargo Bank

Mailing Address

City *Charlotte,* State *NC* Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Wells Fargo Bank

Occupation

Bank

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

10 / *31* / *2012*

Amount of Each Receipt this Period

10.00

B. Full Name (Last, First, Middle Initial)

Cricket Mobile

Mailing Address

City *Charlotte,* State *NC* Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Cricket Mobile

Occupation

Cell Phone Service

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

01 / *21* / *2012*

Amount of Each Receipt this Period

40.45

C. Full Name (Last, First, Middle Initial)

Saint Louis, MO campaign trip

Mailing Address

City *Saint Louis* State *MO* Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

11 / *30* / *2012*

Amount of Each Receipt this Period

60.00

Subtotal Of Receipts This Page (optional).....

110.45

Total This Period (last page this line number only).....

13031040429

**SCHEDULE A-P
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF

16 17a 17b 17c 17d 18
19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

People for Robby Wells

A. Full Name (Last, First, Middle Initial)

Wells Fargo Bank
Mailing Address

Date of Receipt

11 / 30 / 2012

City *Charlotte* State *NC* Zip Code *28202*

FEC ID number of contributing federal political committee.

C

Name of Employer

Wells Fargo Bank

Occupation

Bank

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

10.00

B. Full Name (Last, First, Middle Initial)

Cricket Mobile
Mailing Address

Date of Receipt

12 / 20 / 2012

City *Charlotte* State *NC* Zip Code *28202*

FEC ID number of contributing federal political committee.

C

Name of Employer

Cricket Mobile

Occupation

Cell Phone Service

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

40.45

C. Full Name (Last, First, Middle Initial)

Wells Fargo Bank
Mailing Address

Date of Receipt

12 / 31 / 2012

City *Charlotte* State *NC* Zip Code *28202*

FEC ID number of contributing federal political committee.

C

Name of Employer

Wells Fargo Bank

Occupation

Bank

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

10.00

Subtotal Of Receipts This Page (optional).....

60.45

Total This Period (last page this line number only)

170.90

13031040430

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF

☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

People for Robby Wells

Full Name (Last, First, Middle Initial)

A. *Paypal Verifybank*

Mailing Address

Date of Disbursement

11 / 05 / 2012

City *Charlotte*

State *NC*

Zip Code

Purpose of Disbursement

Donation

Candidate Name

Robby Wells

Category/
Type

Amount of Each Disbursement this Period

15

Office Sought:

☐ House
☐ Senate
☒ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: *NC*

District:

Full Name (Last, First, Middle Initial)

B. *Paypal Verifybank*

Mailing Address

Date of Disbursement

11 / 05 / 2012

City *Charlotte*

State *NC*

Zip Code

Purpose of Disbursement

Donation

Candidate Name

Robby Wells

Category/
Type

Amount of Each Disbursement this Period

09

Office Sought:

☐ House
☐ Senate
☒ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: *NC*

District:

Full Name (Last, First, Middle Initial)

C. *Paypal Verifybank*

Mailing Address

Date of Disbursement

11 / 06 / 2012

City *Charlotte*

State *NC*

Zip Code

Purpose of Disbursement

Donation

Candidate Name

Robby Wells

Category/
Type

Amount of Each Disbursement this Period

24

Office Sought:

☐ House
☐ Senate
☒ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: *NC*

District:

Subtotal Of Receipts This Page (optional).....

48

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

PAGE OF

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NAME OF COMMITTEE (In Full)

People for Robby Wells

Full Name (Last, First, Middle Initial)

Date of Disbursement

11 / 13 / 2012

A. *Wells, Robby C.*

Mailing Address

7427 Hammer Dr.

City

Charlotte

State

NC

Zip Code

28213

Purpose of Disbursement

Contribution

Candidate Name

Robby Wells

Category/
Type

Amount of Each Disbursement this Period

20.00

Office Sought:

☐ House
☐ Senate
☒ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: *NC*

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

11 / 16 / 2012

B. *Grayson, Derrick*

Mailing Address

City

Atlanta

State

GA

Zip Code

Purpose of Disbursement

Contribution

Candidate Name

Robby Wells

Category/
Type

Amount of Each Disbursement this Period

50.00

Office Sought:

☐ House
☐ Senate
☒ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: *GA*

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

11 / 26 / 2012

C. *Grayson, Derrick*

Mailing Address

City

Atlanta

State

GA

Zip Code

Purpose of Disbursement

Contribution

Candidate Name

Robby Wells

Category/
Type

Amount of Each Disbursement this Period

50.00

Office Sought:

☐ House
☐ Senate
☒ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: *GA*

District:

Subtotal Of Receipts This Page (optional).....

120.00

Total This Period (last page this line number only).....

13031040432

SCHEDULE B-P
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

PAGE OF

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NAME OF COMMITTEE (In Full)

People For Robby Wells

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY
12 / 03 / 2012

A. *Wells, Robby, C.*

Mailing Address

7427 Ravenna Dr.

City

Charlotte, NC

State

Zip Code

28213

Purpose of Disbursement

Donation

Candidate Name

Robby Wells

Category/
Type

Amount of Each Disbursement this Period

500

Office Sought:

☐ House
☐ Senate
☒ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: *NC*

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY
12 / 10 / 2012

B. *Grayson, Derrick*

Mailing Address

City

Atlanta

State

GA

Zip Code

Purpose of Disbursement

Donation

Candidate Name

Robby Wells

Category/
Type

Amount of Each Disbursement this Period

50.00

Office Sought:

☐ House
☐ Senate
☒ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: *GA*

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Subtotal Of Receipts This Page (optional).....

55.00

Total This Period (last page this line number only).....

175.48

**SCHEDULE C-P
LOANS**

Use separate schedule(s) for each category of
the Detailed Summary Page

PAGE OF

FOR LINE NUMBER: ☐ 19a ☐ 19b
(check only one)

NAME OF COMMITTEE (In Full)

People for Robby Wells

LOAN SOURCE Full Name (Last, First, Middle Initial)

Election:

☐ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

City

State

ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

TERMS

Date Incurred
M M / D D / Y Y Y Y

Date Due
M M / D D / Y Y Y Y

Interest Rate
% (apr)

Secured:
☐ Yes ☐ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Subtotal Of Receipts This Page (optional).....

Total This Period (last page this line number only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13031040434

LOANS AND LINES OF CREDIT FROM
LENDING INSTITUTIONS

Supplementary from Information
found on Page ___ of Schedule C-P

NAME OF COMMITTEE (in full, type or print)

FEC IDENTIFICATION NUMBER

C

People for Robby Wells

FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER)

CITY STATE ZIP CODE

AMOUNT OF LOAN

INTEREST RATE (APR)

%

DATE INCURRED OR ESTABLISHED

MM / DD / YYYY

DATE DUE

MM / DD / YYYY

A. Has loan been restructured?

No Yes

If yes, date originally incurred:

MM / DD / YYYY

B. If line of credit:

Amount of this draw

Total outstanding balance

C. Are other parties secondarily liable for the debt incurred?

No Yes

(Endorsers and guarantors must be reported on Schedule C-P)

D. Are ANY of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?

No Yes

If yes, specify:

What is the value of this collateral:

Does the lender have a perfected security interest in it?

No Yes

E. Are any future contributions or future receipts of interest income, or future receipts of public financing pledged as collateral for this loan?

No Yes

If yes, specify:

What is the estimated value?

A depository account must be established pursuant to

11 CFR 100.7(b)(11)(i)(B) and 100.8(b)(12)(i)(B). Date account established:

MM / DD / YYYY

Location of account:

Date debtor authorized the Secretary of the U.S. Treasury to make direct deposits of public financing payments to the depository account:

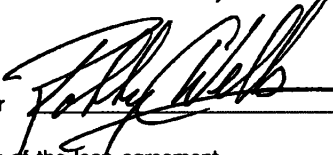
MM / DD / YYYY

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and demonstrate that it assures repayment.

G. Type or Print Name of Committee Treasurer

Robert C. Wells, Jr.

Signature of Treasurer



Date

MM / DD / YYYY
01 / 30 / 2013

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

1. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
2. The loan was made on terms and conditions (including interest rate) no more favorable at the time that those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
3. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth in 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.

Type or Print Name of Authorized Representative

Title

Signature of Authorized Representative

Date

MM / DD / YYYY

DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate
schedule(s)
for each
numbered line)

FOR LINE NUMBER: ☐ 11
(check only one) ☐ 12

NAME OF COMMITTEE (In Full)
People for Lobby Wells

Nature of Debt (Purpose):	Debt is incurred for the purpose of financing the company's operations and capital expenditures.
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City	State	Zip Code
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Nature of Debt (Purpose):	
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City	State	Zip Code
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Debt Details	
Debt ID	Debt Description
1	Debt 1: \$100,000, 5% interest, 10-year term
2	Debt 2: \$200,000, 6% interest, 15-year term
3	Debt 3: \$300,000, 7% interest, 20-year term
4	Debt 4: \$400,000, 8% interest, 25-year term
5	Debt 5: \$500,000, 9% interest, 30-year term
6	Debt 6: \$600,000, 10% interest, 35-year term
7	Debt 7: \$700,000, 11% interest, 40-year term
8	Debt 8: \$800,000, 12% interest, 45-year term
9	Debt 9: \$900,000, 13% interest, 50-year term
10	Debt 10: \$1,000,000, 14% interest, 55-year term
11	Debt 11: \$1,100,000, 15% interest, 60-year term
12	Debt 12: \$1,200,000, 16% interest, 65-year term
13	Debt 13: \$1,300,000, 17% interest, 70-year term
14	Debt 14: \$1,400,000, 18% interest, 75-year term
15	Debt 15: \$1,500,000, 19% interest, 80-year term
16	Debt 16: \$1,600,000, 20% interest, 85-year term
17	Debt 17: \$1,700,000, 21% interest, 90-year term
18	Debt 18: \$1,800,000, 22% interest, 95-year term
19	Debt 19: \$1,900,000, 23% interest, 100-year term
20	Debt 20: \$2,000,000, 24% interest, 105-year term
21	Debt 21: \$2,100,000, 25% interest, 110-year term
22	Debt 22: \$2,200,000, 26% interest, 115-year term
23	Debt 23: \$2,300,000, 27% interest, 120-year term
24	Debt 24: \$2,400,000, 28% interest, 125-year term
25	Debt 25: \$2,500,000, 29% interest, 130-year term
26	Debt 26: \$2,600,000, 30% interest, 135-year term
27	Debt 27: \$2,700,000, 31% interest, 140-year term
28	Debt 28: \$2,800,000, 32% interest, 145-year term
29	Debt 29: \$2,900,000, 33% interest, 150-year term
30	Debt 30: \$3,000,000, 34% interest, 155-year term
31	Debt 31: \$3,100,000, 35% interest, 160-year term
32	Debt 32: \$3,200,000, 36% interest, 165-year term
33	Debt 33: \$3,300,000, 37% interest, 170-year term
34	Debt 34: \$3,400,000, 38% interest, 175-year term
35	Debt 35: \$3,500,000, 39% interest, 180-year term
36	Debt 36: \$3,600,000, 40% interest, 185-year term
37	Debt 37: \$3,700,000, 41% interest, 190-year term
38	Debt 38: \$3,800,000, 42% interest, 195-year term
39	Debt 39: \$3,900,000, 43% interest, 200-year term
40	Debt 40: \$4,000,000, 44% interest, 205-year term
41	Debt 41: \$4,100,000, 45% interest, 210-year term
42	Debt 42: \$4,200,000, 46% interest, 215-year term
43	Debt 43: \$4,300,000, 47% interest, 220-year term
44	Debt 44: \$4,400,000, 48% interest, 225-year term
45	Debt 45: \$4,500,000, 49% interest, 230-year term
46	Debt 46: \$4,600,000, 50% interest, 235-year term
47	Debt 47: \$4,700,000, 51% interest, 240-year term
48	Debt 48: \$4,800,000, 52% interest, 245-year term
49	Debt 49: \$4,900,000, 53% interest, 250-year term
50	Debt 50: \$5,000,000, 54% interest, 255-year term
51	Debt 51: \$5,100,000, 55% interest, 260-year term
52	Debt 52: \$5,200,000, 56% interest, 265-year term
53	Debt 53: \$5,300,000, 57% interest, 270-year term
54	Debt 54: \$5,400,000, 58% interest, 275-year term
55	Debt 55: \$5,500,000, 59% interest, 280-year term
56	Debt 56: \$5,600,000, 60% interest, 285-year term
57	Debt 57: \$5,700,000, 61% interest, 290-year term
58	Debt 58: \$5,800,000, 62% interest, 295-year term
59	Debt 59: \$5,900,000, 63% interest, 300-year term
60	Debt 60: \$6,000,000, 64% interest, 305-year term
61	Debt 61: \$6,100,000, 65% interest, 310-year term
62	Debt 62: \$6,200,000, 66% interest, 315-year term
63	Debt 63: \$6,300,000, 67% interest, 320-year term
64	Debt 64: \$6,400,000, 68% interest, 325-year term
65	Debt 65: \$6,500,000, 69% interest, 330-year term
66	Debt 66: \$6,600,000, 70% interest, 335-year term
67	Debt 67: \$6,700,000, 71% interest, 340-year term
68	Debt 68: \$6,800,000, 72% interest, 345-year term
69	Debt 69: \$6,900,000, 73% interest, 350-year term
70	Debt 70: \$7,000,000, 74% interest, 355-year term
71	Debt 71: \$7,100,000, 75% interest, 360-year term
72	Debt 72: \$7,200,000, 76% interest, 365-year term
73	Debt 73: \$7,300,000, 77% interest, 370-year term
74	Debt 74: \$7,400,000, 78% interest, 375-year term
75	Debt 75: \$7,500,000, 79% interest, 380-year term
76	Debt 76: \$7,600,000, 80% interest, 385-year term
77	Debt 77: \$7,700,000, 81% interest, 390-year term
78	Debt 78: \$7,800,000, 82% interest, 395-year term
79	Debt 79: \$7,900,000, 83% interest, 400-year term
80	Debt 80: \$8,000,000, 84% interest, 405-year term
81	Debt 81: \$8,100,000, 85% interest, 410-year term
82	Debt 82: \$8,200,000, 86% interest, 415-year term

City _____ State _____ Zip Code _____



Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 2/5/13
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<input type="checkbox"/> USPS Priority Mail	Postmarked
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
AmW PREPARER	2/11/13 DATE PREPARED

(3/2005)

13031040438